MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/554395

FILING DATE 12 OCT 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		2				
5		2				
6		1		1		
7		1		1		
8		1		1		
9		2		1		
10		2		1		
11		2		1		
12		2		1		
13		2		1		
14		2		1		
15		2		1		
16				1		
17				1		
18				1		
19				1		
20				1		
21				1		
22				1		
23				1		
24				1		
25				1		
26				1		
27				1		
28		1		1		
29		1		1		
30		1		1		
31		1		1		
32	1	1	1			
33	1	1		1		
34		1		1		
35		1		1		
36		1				
37		1		1		
38		2		1		
39		2		1		
40		1		1		
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3		3			
TOTAL DEP.	46		37			
TOTAL CLAIMS	49		40			

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						